Docket No. 300.1003

## **Declaration and Power of Attorney For Patent Application English Language Declaration**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

| I believe I am the original, fir first and joint inventor (if plu which a patent is sought on  | ral names are li   | sted below)                                    |  | •  | •  |
|--|--|--|--|--|--|
| HMG CO REDUCTASE INHIB   | ITOR EXTENDE   | D RELEASE                                      | FORMULATION  |  |  |
| the specification of which   |  | •  |  |  |  |
| (check one)  |  |  |  |  |  |
| ☑ is attached hereto.  |  |  |  |  |  |
| ☐ was filed on   |  | as United                                      | l States Application                                       | n No. or PCT                                     | International                                      |
| Application Number   | ······································                   |  |  |  |  |
| and was amended on   | <u>-</u>   |  |  | · · · · · · · · · · · · · · · · · · ·            |  |
|  |  | (if a  | applicable)  |  |  |
| I hereby state that I have reincluding the claims, as ame  |  |  |  | ove identified                                   | specification,                                     |
| I acknowledge the duty to c<br>known to me to be material<br>Section 1.56.   |  |  |  |  |  |
| I hereby claim foreign prio<br>Section 365(b) of any foreign<br>any PCT International application in the second inventor's certificate or PCT<br>on which priority is claimed. | gn application(s<br>cation which des<br>dentified below, | i) for patent<br>signated at le<br>by checking | or inventor's certife ast one country ot the box, any fore | icate, or Sect<br>ther than the lign application | ion 365(a) of<br>Jnited States,<br>a for patent or |
| Prior Foreign Application(s)   |  |  |  | Priority   | Not Claimed  |
|  |  |  |  |  |  |
| (Number)   | (Country)  |  | (Day/Month/Year F  | filed)   |  |
| (Number)   | (Country)  |  | (Day/Month/Year F  | iled)  | П  |
| (Number)   | (Country)  | <del></del>                                    | (Day/Month/Year F  | iled)  | <b>-</b>   |
|  |  |  |  |  |  |

|                              | 35 U.S.C. Section 119(e) | of any United States provisiona  |
|------------------------------|--------------------------|--|
| application(s) listed below: |                          | ·  |
|                              |                          |  |
| (Application Serial No.)     | (Filing Date)            |  |
|                              |                          |  |
| (Application Serial No.)     | (Filing Date)            | The second secon |
|                              |                          |  |
| (Application Serial No.)     | (Filing Date)            |  |

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, C. F. R., Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

| 09/339,494               | 6/24/99       | Pending                                    |
|--------------------------|---------------|--|
| (Application Serial No.) | (Filing Date) | (Status)<br>(patented, pending, abandoned) |
| 08/989,253               | 12/12/97      | Patented                                   |
| (Application Serial No.) | (Filing Date) | (Status)<br>(patented, pending, abandoned) |
| (Application Serial No.) | (Filing Date) | (Status) (patented, pending, abandoned)    |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Clifford M. Davidson, Reg. No. 32,728; Leslye B. Davidson, Reg. No. 38,854; Cary S. Kappel, Reg. No. 36,561; William C. Gehris, Reg. No. 38,156; Julie Lee Bowker, Reg. No. 37,870; Robert J. Paradiso, Reg.No. 41,240; Jane E. Alexander, Reg No. 36,014; Scott L. Appelbaum, Reg. No. 41,587; and Marc D. Baker, Reg. No. 44,017

Send Correspondence to:

Clifford M. Davidson, Esq.

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New York, New York 10036

Direct Telephone Calls to: (name and telephone number)

Clifford M. Davidson

212-997-1028

| Full name of sole or first inventor Chih-Ming Chen | Shirthe_ | 10/28/99 |
|--|----------|----------|
| Sole or first inventor's signature                 |          | Date     |
| Residence<br>Davie, Florida                        |          |          |
| Citizenship<br>United States of America            |          |          |
| Post Office Address<br>10680 S.W. 40 Manor         |          |          |
| Davie, Florida 33328                               |          |          |

| Full name of second inventor, if any Joseph Chou |   | 1 |      |      |
|--|---|---|------|------|
| Second inventor's signature                      |   |   | <br> | Date |
| Residence<br>Coral Springs, Florida              | , |   |      |      |
| Citizenship United States of America             |   |   |      | ,    |
| Post Office Address<br>5755 NW 54th Place        |   |   |      |      |
| Coral Springs, Florida 33067                     |   |   |      | -    |

| Full name of third inve                | anor, ii arry                         | • •  |                                       | * * , *     |             |  |     |               |             | ~-                                    |                    |
|--|---------------------------------------|--|---------------------------------------|-------------|-------------|--|-----|---------------|-------------|---------------------------------------|--------------------|
| Third inventor's signa                 | ture                                  | <u>-</u>   |                                       |             |             |  |     |               |             | Date                                  |                    |
| Residence<br>Hollywood, Florid         | a                                     |  | ·                                     |             |             |  |     |               |             | , , , , , , , , , , , , , , , , , , , |                    |
| Citizenship<br>United States of A      | merica                                |  |                                       | <u> </u>    |             |  |     | <del></del>   | ·           | •                                     |                    |
| Post Office Address<br>P.O. Box 817245 |                                       |  |                                       | •           |             |  |     | 1941, 1844    | 3.          |                                       |                    |
| Hollywood, Florid                      | a 33081                               |  |                                       | :           |             |  |     |               |             |                                       |                    |
|  |                                       |  |                                       |             |             |  |     | •             |             |                                       |                    |
| Full name of fourth in                 | ventor, if any                        |  | <del></del>                           | · ·         |             |  |     | <del>.</del>  | · · ·       |                                       |                    |
| Fourth inventor's sign                 | ature                                 |  |                                       | ·           |             |  |     |               |             | Date                                  |                    |
| Residence                              |                                       |  | <del> </del>                          |             | <del></del> | <del></del> .                                  |     |               |             | <del></del>                           |                    |
| Citizenship                            |                                       |  |                                       |             |             |  |     |               |             |                                       |                    |
| Post Office Address                    |                                       |  |                                       | -           |             |  |     | <del>:</del>  |             |                                       |                    |
|  |                                       | <del>-</del> ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; | · · · · · · · · · · · · · · · · · · · |             | •           |  |     |               | · · ·       | · .                                   |                    |
|  |                                       |  |                                       |             |             |  |     |               |             |                                       |                    |
| Full name of fifth inve                | ntor, if any                          |  |                                       |             |             |  |     |               | <del></del> | <del></del>                           |                    |
| Fifth inventor's signat                | ure                                   |  |                                       | <u> </u>    | <del></del> |  |     | <del></del>   | 5           | Date                                  |                    |
| Residence                              |                                       | <del></del>  | <del></del>                           |             |             | <del></del>                                    |     |               |             |                                       |                    |
| Citizenship                            | · · · · · · · · · · · · · · · · · · · | <u>·</u> :   | <u></u>                               | <u> </u>    |             |  | · · | <del></del>   |             | ٠.,                                   |                    |
| Post Office Address                    |                                       | ,  | . :                                   |             |             |  |     |               |             |                                       |                    |
|  |                                       |  | •                                     |             |             |  |     |               |             |                                       |                    |
|  |                                       | <del></del>  |                                       |             |             |  |     |               |             |                                       | <del>: · · ·</del> |
| Full name of sixth inv                 | entor, if any                         | <del></del>  |                                       |             |             | <del></del> .                                  |     | ·<br>·        |             | • • •                                 | <u> </u>           |
| Sixth inventor's signa                 | ture                                  | <del>- · · · · · · · · · · · · · · · · · · ·</del> |                                       | ·           | · .         |  |     | <del></del> . |             | Date                                  |                    |
| Residence                              |                                       | <del>-</del>                                       |                                       | <del></del> | <del></del> | ·  |     | ·             |             |                                       | *                  |
| Citizenship                            | • .                                   |  |                                       | · · · · ·   |             |  |     |               | • .         |                                       | · · · ·            |
| Post Office Address                    |                                       | <del></del>  | <del> </del>                          | <del></del> |             | <u>·                                      </u> |     |               |             |                                       |                    |
|  |                                       |  |                                       |             | •           |  |     |               |             | <u>.</u>                              |                    |

Docket No. 300.1003

## **Declaration and Power of Attorney For Patent Application English Language Declaration**

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My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

| HMG CO REDUCTASE INHIE  | SITOR EXTENDED I  | RELEASE 1                                   | FORMULATIO  | ON  |   |
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| the specification of which  |   |   |   |   |   |
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| is attached hereto.   |   |   | e de la companya de<br>La companya de la co |   |   |
| ☐ was filed on  |   | as United                                   | l States Annli  | ication No                                    | or PCT International  |
| Application Number  |   | . as office                                 | r Clates Appli  | oddon 140.                                    | or ror meriadonar   |
| and was amended on  |   |   |   | •   | <del></del>   |
| <del>-</del>  |   | · (if`a                                     | applicable)   |   |   |
| I hereby state that I have reincluding the claims, as ame   |   |   |   |   | dentified specification,  |
| I acknowledge the duty to a known to me to be materi Section 1.56.  I hereby claim foreign prior Section 365(b) of any foreign any PCT International applicated below and have also inventor's certificate or PCT on which priority is claimed. | ority benefits unde ign application(s) focation which design identified below, by International applicational | as define r Title 35, or patent nated at le | United Stat<br>or inventor's<br>east one cour<br>the box, any   | ces Code, certificate atry other to foreign a | Federal Regulations, Section 119(a)-(d) or , or Section 365(a) of han the United States, pplication for patent or |
| Prior Foreign Application(s)  |   |   |   |   | Priority Not Claimed  |
|   |   |   |   |   |   |
| (Number)  | (Country)   |   | (Day/Month/   | Year Filed)                                   |   |
| (Number)  | (Country)   | <del></del>                                 | (Day/Month/   | Year Filed)                                   | <b>U</b>  |
| (Number)  | (Country)   | · .   | (Day/Month/   | Year Filed)                                   |   |
| TO-SR-01 (9-95) (Modified)  |   | P02/REV02                                   | . Patent a  | nd Trademark (                                | Office I S DEPARTMENT OF COMMI  |

| I hereby claim the benefit under | 35 U.S.C. Section 1                   | 19(e) of any United  | States provisional |
|----------------------------------|---------------------------------------|--|--------------------|
| application(s) listed below:     | · · · · · · · · · · · · · · · · · · · | •  |                    |
|                                  | ·                                     |  |                    |
| (Application Serial No.)         | (Filing Date)                         | <del></del>  |                    |
|                                  |                                       |  | •                  |
| (Application Serial No.)         | (Filing Date)                         |  |                    |
|                                  |                                       | The state of the s |                    |
|                                  |                                       |  |                    |
| (Application Serial No.)         | (Filing Date)                         |  |                    |

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Send Correspondence to:

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Direct Telephone Calls to: (name and telephone number)

Clifford M. Davidson

212-997-1028

| Full name of sole or first inventor Chih-Ming Chen |      |    |
|--|------|----|
| Sole or first inventor's signature                 | Date |    |
| Residence<br>Davie, Florida                        |      |    |
| Citizenship United States of America               |      |    |
| Post Office Address<br>10680 S.W. 40 Manor         |      | ٠. |
| Davie, Florida 33328                               |      |    |

| Full name of second inventor, if <b>Joseph Chou</b> | any        |   |   |                 |
|---|------------|---|---|-----------------|
| Second inventor's signature                         | Doseph Cho | U |   | Date ('0/2\$/99 |
| Residence<br>Coral Springs, Florida                 |            |   |   | <br>            |
| Citizenship United States of America                |            |   |   |                 |
| Post Office Address<br>5755 NW 54th Place           |            | : |   |                 |
| Coral Springs, Florida 330                          | 067        | - | , |                 |

| David Wong   | •           | • | 1       | ٠.  |                 |              |          | •           |
|--|-------------|---|---------|-----|-----------------|--------------|----------|-------------|
| Third inventor's signature   |             |   |         |     |                 |              | Date     |             |
| Residence<br>Hollywood, Florida  | <del></del> | , ,                                     |         |     |                 |              |          | <u> </u>    |
| Citizenship<br>United States of America  |             |   |         | :   |                 |              |          |             |
| Post Office Address<br>P.O. Box 817245   |             |   |         |     |                 | - 14 Marie 1 |          |             |
| Hollywood, Florida 33081   |             |   |         |     |                 |              |          |             |
|  | ·           |   |         |     |                 |              |          |             |
| full name of fourth inventor, if any   | ·. ·        | · ·                                     | ,       |     |                 |              | ,        |             |
| ourth inventor's signature   |             |   |         |     |                 | <u></u>      | Date     |             |
| Residence  |             |   |         |     | ,               |              |          | <del></del> |
| Ditizenship  |             |   |         |     | •               |              |          |             |
| Post Office Address  |             | ·                                       |         |     |                 | <del></del>  |          | <u>·</u>    |
|  |             |   | •       |     |                 |              |          |             |
|  |             |   |         | _   | · · · · · · · · |              |          |             |
| Full name of fifth inventor, if any  |             |   |         |     |                 | ·            |          |             |
| Fifth inventor's signature   |             |   | · .     |     | <del></del>     |              | Date     | <br>. ·     |
| Residence  |             |   | `       | ··· |                 |              | <u> </u> |             |
| Ditizenship  |             |   | •       |     | • .             |              |          |             |
| Post Office Address  |             |   |         |     | <del></del>     |              | . ,      |             |
|  |             |   |         |     |                 |              | ···      | <del></del> |
|  |             |   |         |     |                 | •            | · · ·    |             |
| Full name of sixth inventor, if any  |             | · .                                     |         |     |                 |              |          |             |
| the state of the s |             |   |         |     |                 |              | Date     |             |
| Sixth inventor's signature   |             |   |         |     |                 |              |          |             |
| Sixth inventor's signature   |             | <del></del>                             | · · · · |     | •               | <del></del>  |          |             |
|  |             |   |         |     |                 |              |          |             |
| Residence  |             |   |         |     |                 |              |          |             |

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| ☑ is attached hereto.         |               | · .  |                |                 |                    |               |
| ☐ was filed on                |               | as Unite   | d States App   | olication No.   | or PCT Inte        | rnational     |
| Application Number            |               | · · · · · · · · · · · · · · · · · · ·  | *.!'           |                 |                    |               |
| and was amended on            |               |  |                |                 |                    |               |
| <u></u>                       |               | (if  | applicable)    |                 |                    |               |
|                               |               |  | .,             |                 |                    |               |
| I hereby state that I have re |               |  |                |                 | dentified spe      | ecification,  |
| including the claims, as ame  | ended by any  | amendment re   | eferred to abo | ove.            | •                  |               |
|                               |               |  |                |                 |                    |               |
| I acknowledge the duty to o   |               |  | ,              |                 |                    |               |
| known to me to be materi      | al to patenta | bility as define   | ed in Title 3  | 7, Code of      | Federal Re         | gulations,    |
| Section 1.56.                 |               |  |                |                 | •                  |               |
|                               |               |  |                |                 |                    |               |
| I hereby claim foreign prio   | • ,           | and the second s |                |                 |                    |               |
| Section 365(b) of any forei   |               |  |                |                 |                    |               |
| any PCT International applic  |               | , —  |                | -               |                    |               |
| listed below and have also i  |               | •  | _              | •               |                    |               |
| inventor's certificate or PCT |               | application ha   | iving a filing | date before     | that of the a      | pplication    |
| on which priority is claimed. |               | • •  | *              | •               |                    |               |
| Prior Foreign Application(s)  |               |  |                | •               | Priority Not       | l Claimed     |
| . Hor roroigir/tpphoation(a)  |               |  | ,              | *               |                    |               |
|                               |               |  | •              |                 |                    |               |
| (Number)                      | (Country)     | · · · · · · · · · · · · · · · · · · ·  | /Day/Month     | /Year Filed)    | u                  |               |
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| (Number)                      | (Country)     | <del></del>  | (Day/Month     | /Year Filed)    |                    |               |
| (Number)                      | (Courtay)     |  | (Day/Morta     | irrearriied)    |                    | _             |
| (Number)                      | (Country)     |  | (Day/Month     | Year Filed)     |                    |               |
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| TO-SB-01 (9-95) (Modified)    |               | P02/REV02  | Patent         | and Trademark C | Office-U.S. DEPART | MENT OF COMME |

| application(s) listed below: |               |          | <del></del> |
|------------------------------|---------------|----------|-------------|
| (Application Serial No.)     | (Filing Date) |          |             |
|                              |               |          |             |
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| 08/989,253               | 12/12/97   | Patented Patented  |  |  |
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|                          |  |  |  |  |
| (Application Serial No.) | (Filing Date)  | (Status) (patented, pending, abandoned)  |  |  |
|                          | (Application Serial No.)  08/989,253  (Application Serial No.) | (Application Serial No.) (Filing Date)  08/989,253 12/12/97 (Application Serial No.) (Filing Date) |  |  |

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Send Correspondence to:

Clifford M. Davidson, Esq.

DAVIDSON, DAVIDSON & KAPPEL, LLC 1140 Avenue of the Americas, 15th Floor

New York, New York 10036

Direct Telephone Calls to: (name and telephone number)

Clifford M. Davidson

212-997-1028

| Full name of sole or first inventor Chih-Ming Chen |  |          |
|--|--|----------|
| Sole or first inventor's signature                 | <del>·····································</del> | <br>Date |
| Residence<br>Davie, Florida                        |  |          |
| Citizenship United States of America               |  |          |
| Post Office Address<br>10680 S.W. 40 Manor         |  |          |
| Davie, Florida 33328                               |  |          |

| Full name of second inventor, if any Joseph Chou |  |   |      |
|--|--|---|------|
| Second inventor's signature                      |  |   | Date |
| Residence<br>Coral Springs, Florida              |  | - |      |
| Citizenship United States of America             |  |   |      |
| Post Office Address<br>5755 NW 54th Place        |  |   |      |
| Coral Springs, Florida 33067                     |  |   |      |

| <u> </u>  |                                       | •             |   |             | :           |               |                |                                       |             |
|---|---------------------------------------|---------------|---|-------------|-------------|---------------|----------------|---------------------------------------|-------------|
| Full name of third inventor, if any <b>David Wong</b> |                                       |               |   |             |             |               |                | (0-22                                 | -99         |
| Third inventor's signature                            |                                       |               |   |             |             |               |                | Date                                  |             |
| Residence<br>Hollywood, Florida                       |                                       |               |   |             | -           |               |                |                                       |             |
| Citizenship<br>United States of America               | •                                     |               |   |             |             |               |                |                                       |             |
| Post Office Address<br>P.O. Box 817245                |                                       |               |   |             |             |               | · 19 18 2 18 1 | ***                                   | •           |
| Hollywood, Florida 33081                              | ,                                     |               |   |             |             |               |                |                                       |             |
| 1   |                                       |               |   |             |             |               |                | -                                     |             |
| full name of fourth inventor, if any                  | •                                     |               |   |             |             |               |                |                                       |             |
| Fourth inventor's signature                           | <del></del>                           |               |   | · .         |             |               | <del></del>    | Date                                  |             |
| Residence   |                                       |               | • |             |             |               |                |                                       | <u> </u>    |
| Ditizenship   | · .                                   |               |   |             |             |               |                | · · · .                               |             |
| Post Office Address                                   | <del></del>                           |               | ·                                       |             |             | ·             |                | <u> </u>                              |             |
|   | <u> </u>                              |               |   |             | -           |               | :              |                                       |             |
|   |                                       |               |   |             |             |               |                | ·                                     | ,           |
| Full name of fifth inventor, if any                   | <u> </u>                              | • •           |   |             |             |               |                |                                       | • :         |
| Fifth inventor's signature                            |                                       | <del></del> . |   |             |             | <del></del>   |                | Date                                  |             |
| Residence   |                                       |               | /                                       |             | •           | · ·           |                |                                       | ·<br>       |
| Citizenship   |                                       | <del></del>   |   |             |             | •             |                |                                       |             |
| Post Office Address                                   |                                       | <del></del> . | <del></del>                             | <del></del> | <u> </u>    | <del></del> . |                |                                       |             |
|   |                                       |               |   |             |             |               |                | · · · · · · · · · · · · · · · · · · · |             |
|   |                                       | <del></del>   |   | · ·         | • .         | •             |                | <del></del>                           |             |
| Full name of sixth inventor, if any                   | <del></del>                           |               |   |             | <del></del> |               |                |                                       | ·           |
| Sixth inventor's signature                            | <del> </del>                          |               |   |             |             |               | :              | Date                                  |             |
| Residence   | · · · · · · · · · · · · · · · · · · · |               |   | *****       |             |               |                | 7                                     | · ·         |
| Citizenship   |                                       | ·<br>         |   |             |             | • •           | •              |                                       |             |
| Post Office Address                                   | · ·                                   | ·             |   |             |             |               |                |                                       | <del></del> |
|   |                                       |               |   |             | <del></del> |               |                | <del></del>                           |             |
| •   |                                       |               |   |             |             |               |                |                                       |             |